

Form CPF M109: Statement of Municipal Candidate Not Raising or Expending Campaign Funds

Office of Campaign and Political Finance

File with: Local Election Official (City or Town Clerk)

Candidate's Name:	STEVEN SCIAJCA	
Office Sought:	TOWN COUNCIL	128 RJ
Residential Address:	SS HOLLIS AVE	3 7
City / State / Zip:	BRAINTREE MA 02184	9: 09
E-Mail Address:	SCIASCIA YBRAINTIGE Phone Number: 781-26	67-1124

I hereby certify that I have not opened a campaign bank account for campaign funds because I do not intend to accept contributions or in-kind contributions, make expenditures, including expenditures of my own funds, or incur liabilities for any campaign-related purpose, nor do I currently have any outstanding liabilities for prior campaign-related activity. I submit the following as my campaign report for all bank reporting periods in this calendar year as provided for in Chapter 55 of the Massachusetts General Laws:

1. Ending balance from previous report	ZERO
2. Total receipts for reporting period	ZERO
3. Subtotal	ZERO
4. Total Expenditures for reporting period	ZERO
5. Ending balance	ZERO

After filing this statement, if I decide to raise, accept, or expend funds, or incur liabilities, for a campaign-related purpose, I will immediately notify my local election official in writing, and will file periodic campaign finance reports according to the statutory filing schedule.

Until such notice is on file with the local election official, I certify that the above Zero report will be in effect for each reporting period, in the calendar year in which it is filed, required by Chapter 55 of the Massachusetts General Laws.

This form is valid through December 31 of the year in which it was signed.

SIGNED UNDER THE PENALTIES OF PERJURY:

Candidate's signature;

Date: 1/24/22



Form CPF M 102-0: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

City or Town of: Br.	1.NTR	EE				
		Please print or ty	pe all info	mation, except signatures.		
Fill in dates: Reporting Period Beginning	Month	Day O (Year 202/	Month Ending	Day 3 /	Year 202/
Type of Report: (Check One 8th day preceding preliminary/primary	_	ay preceding elect		30th day following election (Town or Special)		Oth day of January
1. I certify that I am a car 2. I certify that I have not reporting period, and d 3. I certify that I do not he	ndidate for o received and o not have	ny contributions, i a campaign fund i	made anv	expenditures, or incurred any o		

DATE	SIGNATURE Signed under the penalties of perjury	II. RESIDENTIAL ADDRESS (Street and Number)	III. OFFICE SOUGHT
1/24/21	Sand	55 HOLLY ALE	TOWN COURCE
			782 J
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			09